

Agency Report of:  
Ceremonial Role Events and Ticket/Pass Distributions

A Public Document

<b>1. Agency Name</b> <u>City of San Jose</u>		<b>RECEIVED</b> Date Stamp <u>DEC 13 2015</u> City of San Jose Office of the City Clerk Dept. <u>mail ET 10:35am</u>	<b>California Form 802</b> For Official Use Only
Division, Department, or Region (If Applicable) <u>Parks, Recreation and Neighborhood Services</u>			
Designated Agency Contact (Name, Title) <u>Keila Cisneros</u>		<input type="checkbox"/> <b>Amendment</b> (Must provide explanation in Part 3.)	
Area Code/Phone Number <u>408 793 5594</u>	E-mail <u>keila.cisneros@sanjoseca.gov</u>	Date of Original Filing: _____ (Month, Day, Year)	

**2. Function or Event Information**

Does the agency have a ticket policy? Yes ☒ No ☐ Face Value of Each Ticket/Pass \$ 188

Event Description Hockey Game (Sharks vs. Lightning) Date(s) 12 / 5 / 15  
Provide Title/Explanation

Ticket(s)/Pass(es) provided by agency? Yes ☒ No ☐ If no: \_\_\_\_\_  
Name of Source

Was ticket distribution made at the behest of agency official? No ☐ Yes ☒ If yes: \_\_\_\_\_  
Official's Name (Last, First)

**3. Recipients**

• Use Section A to identify the agency's department or unit. • Use Section B to identify an individual. • Use Section C to identify an outside organization.

A. Name of Agency, Department or Unit	Number of Ticket(s)/Pass(es)	Describe the public purpose made pursuant to the agency's policy
<u>City of San Jose, Parks Recreation and Neighborhood Services</u>	<u>8</u>	<u>Recognition of outstanding team performance and project success</u>
<u>Viva CalleSJ Event Team</u>		

B. Name of Individual (Last, First)	Number of Ticket(s)/Pass(es)	Identify one of the following:
		Ceremonial Role <input type="checkbox"/> Other <input type="checkbox"/> Income <input type="checkbox"/> <small>If checking "Ceremonial Role" or "Other" describe below:</small>
		Ceremonial Role <input type="checkbox"/> Other <input type="checkbox"/> Income <input type="checkbox"/> <small>If checking "Ceremonial Role" or "Other" describe below:</small>

C. Name of Outside Organization (include address and description)	Number of Ticket(s)/Pass(es)	Describe the public purpose made pursuant to the agency's policy

**4. Verification**

I have read and understand FPPC Regulations 18944.1 and 18942. I have verified that the distribution set forth above, is in accordance with the requirements.

[Signature] Keila Cisneros Recreation Leader 12/14/15  
Signature of Agency Head or Designee Print Name Title (Month, Day, Year)

Comment: \_\_\_\_\_